

United States of America  
Department of Transportation — Federal Aviation Administration  
**Supplemental Type Certificate**

*Number* SA7326SW 190-817  
AAM

*This certificate, issued to* Interstate Airlines, Inc.  
3800 Rodney Parham Rd.  
Little Rock, Arkansas 72212

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 4b of the Civil Air Regulations.*

*Original Product — Type Certificate Number:* 4A25  
*Make:* McDonnell Douglas  
*Model:* DC-8-62

*Description of Type Design Change:*

Installation of Dual Tracor TA7900 Omega Navigation System in accordance with Interstate Airlines, Inc. Drawing List Report No. 190-101-001, Rev. 1, dated 1-6-88, or later FAA approved revision.

*Limitations and Conditions:*

FAA approved Airplane Flight Manual Supplement 192-120-002 dated 1-8-88, is required. Compatibility of this modification with previously installed equipment must be determined by installer.

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application:* November 30, 1987

*Date reissued:*

*Date of issuance:* January 8, 1988

*Date amended:*



*By direction of the Administrator*

*L. B. Andriesen*  
(Signature)  
for L. B. Andriesen  
Manager, Aircraft Certification Division  
Southwest Region (Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

This certificate may be transferred in accordance with FAR 21.47.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

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### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to *(Name of transferee)* \_\_\_\_\_

*(Address of transferee)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

from *(Name of grantor)* *(Print or type)* \_\_\_\_\_

*(Address of grantor)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor *(In ink)*: \_\_\_\_\_